



Drug Screening

The insurer will pay for drug screening conducted in the office setting by a laboratory with a Clinical Laboratory Improvement Amendment (CLIA) certificate of waiver and confirmation testing performed at a laboratory not requiring a CLIA certificate of waiver.

Codes that can be billed

Effective 1/1/2011 the department will pay for drug screening using the following CPT[®] and HCPCS codes:

- 80100, Drug screen, qualitative; multiple drug classes chromatographic method, each procedure.
- 80102, Drug confirmation, each procedure.
- G0431, Drug screen, qualitative; single drug class method (e.g., immunoassay, enzyme assay), each drug class.
- G0434, Drug screen, other than chromatographic; any number of drug classes, by CLIA waived test or moderate complexity test, per patient encounter.

Payment limits

- 80100 and 80102 are only payable to laboratories that do not require a CLIA certificate of waiver.
- G0431 is limited to one unit per day per patient encounter for laboratories with a CLIA certificate of waiver. Laboratories that do not require a CLIA certificate of waiver may bill more than one unit per day per patient encounter.
- G0434 is limited to one unit per day per patient encounter regardless of the CLIA status of the laboratory.

Codes that are not covered

Effective 1/1/2011 the following CPT codes are not covered by the insurer:

- 80101
- 80104